A5173-2

1988 UPDATE

Source Book of Health Insurance Data

Prepared by
Health Insurance Association of America
1001 Pennsylvania Avenue, N.W.
Washington, D.C. 20004-2599

AUTHORIZATION TO REPRODUCE GRANTED
Library of Congress Catalogue Card Number: 60-187

Please Note:

Effective July 1, 1988, inquiries regarding the information in this publication should be addressed to:

Health Insurance Association of America
Research and Statistics Department
1025 Connecticut Avenue, N.W.
Washington, D.C. 20036

Phone (202) 223-7780

Foreword

Source Book of Health Insurance Data: 1988 Update provides the latest available information for historical tables included in prior editions of the *Source Book of Health Insurance Data*, which is now published on a biennial basis.

The updated tables that are reproduced in this booklet are those tables for which data are most frequently requested.

Additional tables from the 1986-87 *Source Book* for which updates are available are listed on page 31. The majority of these latter tables contain data that are readily available from the government agencies that compile the data. The reader may also request, only in writing, individual updated tables from the HIAA at 1001 Pennsylvania Avenue, NW, Washington, DC 20004-2599.

Charles Eby
Director
Research and Statistics Department

For information call:
A.F. Minor
(202) 624-2456

Key Health Insurance Statistics

	1981	1985	1986	% Change 1985-86	% Change 1981-86
Number of Persons with Private Health Insurance Protection in the United States (000 omitted)					
Hospital expense	186,193	181,329	179,839	– 0.8	– 3.4
Major medical expense (Under age 65 only)	153,676	162,764	155,462	– 4.5	1.2
Disability income:					
Short-term	65,301	N.A.	N.A.	N.A.	N.A.
Long-term	22,582	25,511	23,661	– 7.3	4.8
Dental expense	83,245	99,768*	94,976	– 4.8	14.1
Health Insurance Benefit Payments in the United States (000,000 omitted)					
Insurance companies	$ 41,622	$ 59,962	$ 64,303	7.2	54.5
Blue Cross-Blue Shield and other plans	48,154*	70,074*	77,387	10.4	60.7
Total†	$ 85,884	$117,609	$127,847	8.7	48.9
Health Insurance Premiums in the United States†† (000,000 omitted)					
Insurance companies	$ 48,998	$ 75,169	$ 75,486	0.4	54.1
Blue Cross-Blue Shield and other plans	50,460*	78,199*	84,122	7.6	66.7
Total†	$ 95,136	$139,525	$159,586	14.4	67.7
Community Hospital Statistics in the United States					
Average length of hospital stay (days)	7.6	7.1	7.1	—	– 6.6
Average cost to hospital per patient day	$ 284.33	$ 460.19	$ 500.81	8.8	76.1
Average cost to hospital per patient stay	$2,171.20	$3,244.74	$3,532.51	8.9	62.7

N.A.—Not available.

*Estimate.

†"Total" Benefits and Premiums eliminate the estimated duplication that results from insurance companies and the Health Care Financing Administration ("Other plans" data) both reporting administrative service only (ASO) benefits and premiums in their data.

††Data for insurance companies refer to earned premiums. Data for Blue Cross-Blue Shield and other plans refer to earned income.

NOTE: Some data are revised from previous editions.

SOURCES: Health Insurance Association of America, Blue Cross and Blue Shield Association, American Hospital Association and the U.S. Department of Health and Human Services.

Table 1.1
Number of Persons with Private Health Insurance Protection in the United States by Type of Coverage (000 omitted)

End of year	Hospital expense	Major medical expense	Disability income		Dental expense†
			Short-term	Long-term	
1940	11,962	–	N.A.	N.A.	–
1945	32,072	–	N.A.	N.A.	–
1950	76,639	–	37,793	*	–
1955	101,400	N.A.	39,513	*	–
1960	122,500	32,590	42,436	*	N.A.
1961	125,825	41,974	43,055	*	N.A.
1962	129,407	48,393	45,002	*	N.A.
1963	133,472	55,382	44,246	3,029	N.A.
1964	136,304	62,112	45,092	3,363	N.A.
1965	138,671	69,666	46,927	4,514	N.A.
1966	142,369	73,843	49,931	5,068	N.A.
1967	146,409	81,550	51,975	6,778	4,570
1968	151,947	87,641	55,636	7,836	5,867
1969	155,025	95,528	57,770	9,282	8,858
1970	158,847	103,544	58,089	10,966	11,972
1971	161,849	108,813	59,280	12,284	15,263
1972	164,098	113,837	61,548	14,538	16,853
1973	168,455	124,627	64,168	17,011	20,418
1974	173,140	131,438	65,282	17,799	27,855
1975	178,180	134,092	62,971	18,396	30,337
1976	176,858	138,657	62,250	17,779	41,703
1977	179,853	139,884	64,627	19,364	50,737
1978	185,690	142,158	68,307	19,100	55,462
1979	185,743	148,805	65,808	19,920	61,608
1980	187,375	153,564	68,831	22,051	79,433
1981	186,193	153,676	65,301	22,582	83,245
1982	188,337	160,056	68,638	25,313	93,112
1983	186,644	159,612	64,146	24,655	100,828
1984	184,403	N.A.	59,332	22,944	102,159
1985	181,329	N.A.	N.A.	25,511	99,768
1986					
Under 65	158,635	155,462	N.A.	N.A.	N.A.
65 and over	21,204	N.A.	N.A.	N.A.	N.A.
Total	179,839	N.A.	N.A.	23,661	94,976

N.A.—Not available.

*Included in "Short-term," with the possibility of some duplication of disability income coverage for these years.

†Estimates on dental expense include fully-insured group plans, self-administered plans, plans employing third party administrators, and health maintenance organizations.

NOTE: Some data are revised from previous editions. Data for 1978 and later have been adjusted downward due to new data on average family size. For 1975 and later, data include the number of persons covered in Puerto Rico and U.S. territories and possessions. The data refer to the net total of people protected, i.e., duplication among persons protected by more than one kind of insuring organization or more than one insurance company policy providing the same type of coverage has been eliminated.

SOURCES: Health Insurance Association of America, Blue Cross and Blue Shield Association and the U.S. Department of Health and Human Services.

Table 1.2
Number of Persons with Hospital Insurance Protection in the United States by Type of Insurer (000 omitted)

End of year	All insurers*	Insurance Companies			Blue Cross/ Blue Shield	Other plans**
		All insurance companies*	Group policies	Individual and family policies		
1940	11,962	3,700	2,500	1,200	6,012	2,250
1945	32,072	10,504	7,804	2,700	18,899	2,670
1950	76,639	36,955	22,305	17,296	38,822	4,445
1955	101,400	53,480	38,620	19,887	50,726	6,545
1960	122,500	69,226	54,416	22,181	58,050	5,994
1961	125,825	70,367	56,077	22,420	58,664	7,102
1962	129,407	72,156	58,057	23,035	60,118	6,937
1963	133,472	74,478	61,448	23,516	61,016	7,165
1964	136,304	75,825	63,011	23,951	62,054	6,840
1965	138,671	77,642	65,415	24,424	63,347	6,984
1966	142,369	80,419	67,799	24,888	65,310	6,633
1967	146,409	82,603	71,454	24,619	67,214	7,050
1968	151,947	85,705	74,073	25,278	70,019	7,277
1969	155,025	88,798	77,973	25,922	72,692	7,702
1970	158,847	89,688	80,505	26,658	75,055	8,131
1971	161,849	91,531	80,641	27,773	76,539	8,545
1972	164,098	93,681	81,526	29,011	78,206	8,053
1973	168,455	94,544	83,626	27,544	81,345	9,562
1974	173,140	97,010	85,385	28,807	80,845	11,072
1975	178,180	99,547	87,185	30,115	86,436	13,145
1976	176,858	97,038	86,824	26,996	86,601	14,868
1977	179,853	100,378	89,219	28,687	86,024	18,106
1978	185,690	105,873	92,624	36,106	85,816	21,489†
1979	185,743	104,084	94,099	34,387	86,148	25,502†
1980	187,375	105,521	97,393	33,763	86,721	33,152†
1981	186,193	105,966	102,975	25,257	85,773†	40,305†
1982	188,337	109,605	103,945	29,375	82,039†	48,246†
1983	186,644	105,942	104,564	22,231	79,600†	53,560†
1984	184,403	103,068	102,978	20,351	79,400†	54,106††
1985	181,329	100,355	99,525	21,175	78,700†	55,059††
1986						
Under 65	158,635	81,436	85,238	8,575	68,400	49,657††
65 and over	21,204	11,035	9,920	3,151	9,600	6,195††
Total	179,839	92,471	95,158***	11,726***	78,000	55,852††

*The data in these columns refer to the net total of people protected, i.e., duplication among persons protected by more than one kind of insuring organization or more than one insurance company policy providing the same type of coverage has been eliminated.

**Other plans include self-insured plans, self-administered plans, plans employing third party administrators, and health maintenance organizations.

***Excludes hospital indemnity coverage, which had been included in prior years. For 1986, group hospital indemnity coverage was 3.5 million and individual hospital indemnity was 6.3 million individuals.

†Estimate.

††For 1984 and later, estimates of persons covered by "Other plans" have been developed by HIAA in the absence of other available data.

NOTE: Some data are revised from previous editions. Data for 1978 and later have been adjusted downward due to new data on average family size. For 1975 and later, data include the number of persons covered in Puerto Rico and U.S. territories and possessions. Persons covered under insurance company administrative service only (ASO) agreements and minimum premium plans (MPP) are included in the categories "All insurance companies" and "Group policies."

SOURCES: Health Insurance Association of America, Blue Cross and Blue Shield Association and the U.S. Department of Health and Human Services.

Table 1.3
Number of Persons with Major Medical Expense Protection in the United States by Type of Insurer (000 omitted)

End of year	All insurers*	Insurance Companies			Blue Cross/ Blue Shield	Other plans**
		All insurance companies*	Group policies	Individual and family policies		
1951	N.A.	108	96	12	N.A.	N.A.
1955	N.A.	5,241	4,759	482	N.A.	N.A.
1960	32,590	25,371	26,454	1,607	3,713	N.A.
1961	41,974	32,334	34,339	2,372	5,059	N.A.
1962	48,393	37,130	39,081	2,949	7,501	N.A.
1963	55,382	42,003	44,006	3,459	10,000	N.A.
1964	62,112	47,338	49,166	4,185	12,500	N.A.
1965	69,666	53,020	55,412	4,456	14,600	N.A.
1966	73,843	57,881	60,984	4,516	14,352	N.A.
1967	81,550	63,428	67,394	4,552	16,279	N.A.
1968	87,641	68,171	72,436	4,873	17,807	N.A.
1969	95,528	73,752	78,165	5,377	20,328	N.A.
1970	103,544	77,061	81,962	5,414	24,905	N.A.
1971	108,813	80,252	85,553	5,479	26,780	N.A.
1972	113,837	83,668	87,806	6,630	30,082	N.A.
1973	124,627	87,839	91,915	7,310	37,328	N.A.
1974	131,438	91,044	95,532	7,235	40,862	N.A.
1975	134,092	92,166	96,718	7,315	42,058	N.A.
1976	138,657	93,191	98,355	6,672	41,670	11,156
1977	139,884	96,003	101,925	6,101	39,390	14,005
1978	142,158	101,877	108,241	6,847	39,317	17,201†
1979	148,805	103,281	109,524	7,222	43,341	21,125†
1980	153,564	105,352	113,002	7,330	45,000	27,733†
1981	153,676	104,943	113,170	6,467	46,500	33,717†
1982	160,056	108,660	116,220	8,018	47,000†	42,604†
1983						
Under 65 only	159,612	108,913	117,596	6,541	44,600†	42,798†
1984						
Under 65 only	167,730	115,351	125,507	5,613	44,500†	47,037††
1985						
Under 65 only	162,764	110,232	119,567	5,872	44,100†	47,866††
1986						
Under 65 only	155,462	105,078	114,549	4,814	39,000†	48,555††

N.A.—Not available.

*The data in these columns refer to the net total of people protected, i.e., duplication among persons protected by more than one kind of insuring organization or more than one insurance company policy providing the same type of coverage has been eliminated.

**Other plans include self-insured plans, self-administered plans, plans employing third party administrators, and health maintenance organizations.

†Estimate.

††For 1984 and later, estimates of persons covered by "Other plans" have been developed by HIAA in the absence of other available data.

NOTE: Some data are revised from previous editions. Data for [illegible] later have been adjusted downward due to new data on average family size. For 1975 and later, data [illegible]er of persons covered in Puerto Rico and U.S. territories and possessions. Persons covered under insu[illegible]ministrative service only (ASO) agreements and minimum premium plans (MPP) are included in the categ[illegible] "All insurance companies" and "Group policies."

SOURCES: Health Insurance Association of America, Blue Cross and Blue Shield Association and the U.S. Department of Health and Human Services.

Table 1.4
Number of Persons with Major Medical Expense Protection with Insurance Companies in the United States by Type of Policy (000 omitted)

End of year	Insurance company total*	Group policies			Individual and family policies
		Net total*	Supplementary	Comprehensive	
1951	108	96	96	–	12
1955	5,241	4,759	3,928	831	482
1960	25,371	24,429	17,991	8,463	1,607
1961	32,334	30,729	24,488	9,851	2,372
1962	37,130	35,002	28,445	10,636	2,949
1963	42,003	39,446	32,307	11,699	3,459
1964	47,338	44,087	36,925	12,241	4,185
1965	53,020	49,700	42,450	12,962	4,456
1966	57,881	54,732	46,830	14,154	4,516
1967	63,428	60,517	51,824	15,570	4,552
1968	68,171	65,076	55,422	17,014	4,873
1969	73,752	70,272	58,905	19,260	5,377
1970	77,061	73,702	61,718	20,244	5,414
1971	80,252	76,971	63,442	22,111	5,479
1972	83,668	79,025	64,443	23,363	6,630
1973	87,839	82,724	66,225	25,690	7,310
1974	91,044	85,979	67,911	27,621	7,235
1975	92,166	87,046	67,310	29,408	7,315
1976	93,191	88,520	66,753	31,602	6,672
1977	96,003	91,733	68,349	33,576	6,101
1978	101,877	97,504	N.A.	N.A.	6,847
1979	103,281	98,663	N.A.	N.A.	7,222
1980	105,352	100,719	N.A.	N.A.	7,330
1981	104,943	100,865	N.A.	N.A.	6,467
1982	108,660	103,548	N.A.	N.A.	8,018
1983					
Under 65 only	108,913	104,660	66,171	51,425	6,541
1984					
Under 65 only	115,351	111,701	68,935	56,572	5,613
1985					
Under 65 only	110,232	106,415	56,717	62,850	5,872
1986					
Under 65 only	105,078	101,949	49,485	65,064	4,814

N.A.—Not available.

*The data in these columns refer to the net total of people protected, i.e., duplication among persons protected by more than one kind of insuring organization or more than one insurance company policy providing the same type of coverage has been eliminated.

NOTE: Some data are reviseo from previous editions. Data for 1978 and later have been adjusted downward due to new data on average family size. For 1975 and later, data include the number of persons covered in Puerto Rico and U.S. territories and possessions. Persons covered under insurance company administrative service only (ASO) agreements and minimum premium plans (MPP) are included in the categories "All insurance companies" and "Group policies."

SOURCE: Health Insurance Association of America.

Table 1.5
Number of Persons with Disability Income Protection by Type of Program in the United States (000 omitted)

End of year	All programs	Insurance Companies			Formal paid sick leave plans	Employee union and association plans
		All insurance companies	Group policies	Individual policies		
1946	26,229	14,369	7,135	8,684	8,400	3,460
1950	37,793	25,993	15,104	13,067	8,900	2,900
1955	39,513	29,813	19,171	13,642	8,500	1,200
1960	42,436	31,836	20,970	14,298	9,500	1,100
Short-Term Disability Income Protection						
1965	46,927	33,527	22,409	11,937	11,700	1,700
1970	58,089	39,789	27,876	14,901	15,900	2,400
1971	59,280	40,180	28,408	13,866	16,500	2,600
1972	61,548	41,208	29,151	14,527	17,640	2,700
1973	64,168	43,298	29,279	16,890	18,170	2,700
1974	65,282	43,672	29,320	17,291	18,910	2,700
1975	62,971	41,071	28,607	15,024	19,400	2,500
1976	62,250	38,940	27,534	13,742	20,610	2,700
1977	64,627	40,047	28,176	14,302	21,880	2,700†
1978	68,307	43,289	28,676	17,606	22,318	2,700†
1979	65,808	40,208	27,005	15,907	22,900†	2,700†
1980	68,831	42,431	29,718	15,209	23,700†	2,700†
1981	65,301	38,201	29,454	10,539	24,400†	2,700†
1982	68,638	41,138	32,465	10,450	24,800†	2,700†
1983	64,146	36,446	28,576	9,482	25,000†	2,700†
1984	59,332	31,632	24,686	8,369	25,000†	2,700†
1985	N.A.	28,308	23,299	6,035†	N.A.	N.A.
1986	N.A.	25,104	23,356	4,679†	N.A.	N.A.
Long-Term Disability Income Protection						
1965	4,514	4,514	1,864	2,650	—	—
1970	10,966	10,966	6,954	4,012	—	—
1971	12,284	12,284	7,951	4,333	—	—
1972	14,538	14,538	9,471	5,067	—	—
1973	17,011	17,011	10,595	6,416	—	—
1974	17,799	17,799	11,116	6,683	—	—
1975	18,396	18,396	11,526	6,870	—	—
1976	17,779	17,779	11,516	6,263	—	—
1977	19,364	19,364	12,481	6,883	—	—
1978	19,100	19,100	12,635	6,465	—	—
1979	19,920	19,920	13,409	6,511	—	—
1980	22,051	22,051	15,651	6,400	—	—
1981	22,582	22,582	16,825	5,757	—	—
1982	25,313	25,313	19,163	6,150	—	—
1983	24,655	24,655	19,148	5,507	—	—
1984	22,944	22,944	17,359	5,585	—	—
1985	25,511	25,511	19,644	5,867	—	—
1986	23,661	23,661	18,428	5,233	—	—

†Estimate.

NOTE: For 1975 and later, data include the number of persons covered in Puerto Rico and U.S. territories and possessions. Data in the category "Insurance companies" refers to the net total of people protected, i.e., duplication among persons who are covered by both group and individual policies has been eliminated. Any duplication resulting from the combination of numbers covered for short-term and long-term protection has not been eliminated. For 1980 and later, this category includes administrative service only (ASO) agreements and minimum premium plans (MPP). The category "Formal paid sick leave plans" refers to people with formal paid sick leave plans but without insurance company coverage. Data exclude plans that are both self-administered and self-insured.

SOURCES: Health Insurance Association of America and the U.S. Department of Health and Human Services.

Table 1.6
Number of Persons with Dental Expense Protection in the United States by Type of Insurer (000 omitted)

End of year	All insurers*	Insurance companies**	Blue Cross/ Blue Shield	Other plans***
1967	4,570	2,330	20	2,220
1968	5,867	3,170	35	2,662
1969	8,858	5,159	141	3,558
1970	11,972	7,383	275	4,314
1971	15,263	8,841	1,100	5,322
1972	16,853	10,200	1,110	5,543
1973	20,418	12,097	1,740	6,581
1974	27,855	16,756	3,790	7,309
1975	30,337	18,936	3,318	8,290
1976	41,703	26,562	4,363	11,105
1977	50,737	32,216	5,283	14,234
1978	55,462	36,401	6,800†	17,827†
1979	61,608	42,847	7,100†	22,327†
1980	79,433	54,836	10,000†	27,225†
1981	83,245	59,449	10,400†	35,531†
1982	93,112	66,582	9,100†	44,845†
1983	100,828	69,684	10,400†	51,600†
1984	102,159	66,657	12,600†	55,785††
1985	99,768	62,474	13,800†	56,768††
1986	94,976	63,376	14,000†	57,585††

*For 1975 and later, the data in this column refer to the net total of people protected, i.e., duplication among persons protected by more than one kind of insuring organization or more than one insurance policy providing the same type of coverage has been eliminated.

**Insurance company data are group plans.

***Other plans include self-administered, self-insured plans, plans employing third party administrators, and health maintenance organizations.

†Estimate.

††For 1984 and later, estimates of persons covered by "Other plans" have been developed by HIAA in the absence of other available data.

NOTE: Some data are revised from previous editions. Data for 1978 and later have been adjusted downward due to new data on average family size. For 1975 and later, data include the number of persons covered in Puerto Rico and U.S. territories and possessions.

SOURCES: Health Insurance Association of America, Blue Cross and Blue Shield Association and the U.S. Department of Health and Human Services.

Table 2.1
Health Insurance Benefit Payments by Type of Insurer and by Type of Coverage in the United States (000,000 omitted)

	Year	Total	Hospital-medical expense	Dental expense	Loss of income*
All Insurers††	1950	$ 1,347	N.A.	N.A.	$ 383
	1955	3,142	$ 2,547	**	595
	1960	5,676	4,837	**	839
	1965	9,624	8,578	**	1,046
	1970	17,177	15,127	$ 233	1,817
	1975	32,081	28,494	880	2,707
	1980	76,320	65,936	5,042	5,342
	1981	85,884	74,677	6,051	5,156
	1982	97,135	84,966	6,640	5,529
	1983	104,085	91,892	7,300	4,893
	1984	107,522	94,648	7,714	5,160
	1985	117,609	103,187	8,788	5,634
	1986	**128,502†**	**113,000†**	9,900†	5,602
Insurance Companies	1950	755	372	**	383
	1955	1,785	1,190	**	595
	1960	3,069	2,230	**	839
	1965	5,160	4,114	**	1,046
	1970	9,089	7,132	140	1,817
	1975	16,470	13,164	599	2,707
	1980	37,002	28,865	2,795	5,342
	1981	41,622	32,992	3,474	5,156
	1982	49,159	39,646	3,984	5,529
	1983	51,665	42,400	4,372	4,893
	1984	55,980	45,907	4,913	5,160
	1985	59,962	49,036	5,292	5,634
	1986	64,303	53,438	5,263	5,602
Blue Cross/ Blue Shield and Other Plans†††	1950	590	N.A.	N.A.	—
	1955	1,357	1,357	**	—
	1960	2,607	2,607	**	—
	1965	4,464	4,464	**	—
	1970	8,088	7,995	93	—
	1975	16,932†	16,362	570†	—
	1980	41,706†	39,238	2,468†	—
	1981	48,154†	45,211†	2,943†	—
	1982	53,721†	50,508†	3,213†	—
	1983	58,453†	54,841†	3,612†	—
	1984	61,765†	57,740†	4,025†	—
	1985	70,074†	65,134†	4,940†	—
	1986	**77,387†**	**71,787†**	**5,600†**	—

N.A.—Not available.

*Insurance company coverage only.

**Included in "Hospital-medical expense."

†Estimate.

††Benefits for "All Insurers" eliminate the estimated duplication that results from insurance companies and the Health Care Financing Administration ("Other plans" data) both reporting administrative service only (ASO) benefits in their data.

†††Other plans include self-administered, self-insured plans, plans employing third party administrators and health maintenance organizations.

NOTE: Some data are revised from previous editions. For 1975 and later, data include benefit payments in Puerto Rico and U.S. territories and possessions. Figures do not add to totals in some cases due to rounding. "Medical expense" includes payments for hospital, medical expense other than hospital and major medical benefits. Insurance company benefit payments for 1975 and later include administrative service only (ASO) agreements and minimum premium plans (MPP). Amounts in prior years contained only a portion of this data.

SOURCES: Health Insurance Association of America, Blue Cross and Blue Shield Association and the U.S. Department of Health and Human Services.

Table 2.2
Health Insurance Benefit Payments of Insurance Companies in the United States (000,000 omitted)

Year	Grand total	Group				Individual and family policies		
		Total group	Hospital-medical expense	Dental	Loss of income	Total	Hospital-medical expense	Loss of income
1945	$ 278	$ 139	N.A.	N.A.	N.A.	$ 139	N.A.	N.A.
1950	755	438	N.A.	N.A.	N.A.	317	N.A.	N.A.
1955	1,785	1,252	N.A.	N.A.	N.A.	533	N.A.	N.A.
1960	3,069	2,350	$ 1,809	*	$ 541	719	$ 421	$ 298
1961	3,394	2,616	2,082	*	534	778	457	321
1962	3,763	2,911	2,338	*	573	852	519	333
1963	4,152	3,203	2,614	*	589	948	601	347
1964	4,658	3,585	2,953	*	632	1,073	693	380
1965	5,160	4,000	3,321	*	679	1,160	792	368
1966	5,559	4,357	3,608	*	749	1,203	814	389
1967	6,030	4,790	3,953	$ 42	796	1,239	824	415
1968	6,717	5,362	4,360	54	948	1,355	894	461
1969	7,575	6,202	5,027	79	1,096	1,374	897	476
1970	9,089	7,476	6,043	140	1,293	1,613	1,090	523
1971	9,498	8,018	6,541	175	1,301	1,480	1,006	474
1972	10,622	8,943	7,315	201	1,427	1,679	1,148	531
1973	11,863	9,764	7,924	262	1,578	2,099	1,462	637
1974	13,636	11,439	9,260	332	1,847	2,197	1,517	680
1975	16,470	14,191	11,607	599	1,985	2,279	1,557	722
1976	20,217	17,795	14,425	1,187	2,183	2,422	1,691	731
1977	22,113	19,479	15,683	1,452	2,344	2,634	1,869	765
1978	26,352	22,868	18,696	1,771	2,401	3,484	2,480	1,004
1979	31,692	27,934	22,159	2,185	3,590	3,758	2,644	1,114
1980	37,002	33,002	25,895	2,795	4,312	4,000	2,970	1,030
1981	41,622	37,691	30,057	3,474	4,160	3,931	2,935	996
1982	49,159	44,202	36,074	3,984	4,144	4,957	3,572	1,385
1983	51,665	46,890	38,649	4,372	3,869	4,775	3,751	1,024
1984	55,980	50,305	41,485	4,913	3,907	5,675	4,422	1,253
1985	59,962	53,669	44,340	5,292	4,037	6,293	4,696	1,597
1986	64,303	58,926	49,640	5,262	4,024	5,377	3,800	1,577

N.A.—Not available.

*Included in "Hospital-medical expense."

NOTE: For 1975 and later, data include benefit payments in Puerto Rico and U.S. territories and possessions. Insurance company benefit payments for 1975 and later include administrative service only (ASO) agreements and minimum premium plans (MPP). Aggregates in prior years contained only a portion of these data. Figures do not add to totals in some cases due to rounding.

SOURCE: Health Insurance Association of America.

Table 3.1
Health Insurance Premiums and Ratio to Disposable Personal Income (000,000 omitted)

Premium Income of Insurance Companies, Subscription Income of Blue Cross/Blue Shield and Other Plans in the United States

Year	Insurance companies	Blue Cross/ Blue Shield and other plans	Total premiums**	Disposable personal income	Ratio
1940	$ 286	$ 32	$ 318	$ 75,328	0.42%
1945	550	154	704	149,118	0.47
1950	1,266	687	1,953	207,450	0.94
1955	2,743	1,523	4,266	278,775	1.53
1960	4,671	2,814	7,485	358,900	2.09
1961	5,029	3,246	8,275	373,750	2.21
1962	5,595	3,601	9,196	396,150	2.32
1963	6,145	3,918	10,063	415,825	2.42
1964	6,769	4,332	11,101	451,425	2.46
1965	7,352	4,777	12,129	486,800	2.49
1966	7,796	4,969	12,765	525,900	2.43
1967	8,295	5,247	13,542	562,075	2.41
1968	9,082	5,966	15,048	609,575	2.47
1969	10,197	7,089	17,286	656,675	2.63
1970	11,546	8,439	19,985	715,600	2.79
1971	12,777	10,058	22,835	776,800	2.94
1972	14,771	11,465	26,236	839,575	3.12
1973	16,104	12,908	29,012	949,775	3.05
1974	17,915	14,533	32,448	1,038,350	3.12
1975	20,795*	17,611	36,967	1,142,775	3.23
1976	24,502*	21,455	43,468	1,252,625	3.47
1977	28,676*	25,333	50,449	1,379,325	3.66
1978	32,713*	32,517	63,067	1,551,225	4.07
1979	37,941*	37,625	73,930	1,729,275	4.28
1980	43,666*	43,674	84,742	1,917,900	4.42
1981	48,998*	50,460†	95,136	2,127,600	4.47
1982	58,341*	57,222†	109,472	2,261,425	4.84
1983	63,190*	63,188†	119,876	2,428,100	4.94
1984	70,440*	68,518†	127,635	2,668,600	4.78
1985	75,169*	78,199†	139,525	2,841,100	4.91
1986	75,486††	**84,122†**	**143,389**	3,022,100	**4.74**

*Insurance company premiums before 1975 include only a portion of administrative service only (ASO) agreements and minimum premium plans (MPP).

**"Total Premiums" eliminate the estimated duplication that results from insurance companies and the Health Care Financing Administration ("Other plans" data) both reporting administrative service only (ASO) premium equivalencies in their data.

†Estimate.

††Beginning in 1986, insurance company premiums include reinsurance ceded to other insurance companies and exclude reinsurance assumed from other insurance companies.

NOTE: Some data are revised from previous editions. For 1975 and later, data include premiums paid in Puerto Rico and U.S. territories and possessions. Data for "Insurance companies" prior to 1972 refer to written premiums (which, for group policies, include minor adjustments to reflect premiums of the particular year). "Insurance companies" premiums for 1972 and later refer to earned premiums and are revised to exclude premiums for accidental death and dismemberment and other such limited coverages. Data for Blue Cross/Blue Shield and other hospital-medical plans refer to earned income. Data for Blue Cross/Blue Shield for 1974 and later include premium taxes.

SOURCES: U.S. Department of Health and Human Services, *Argus Health Chart*, U.S. Department of Commerce, Health Insurance Association of America, and Blue Cross and Blue Shield Association.

Table 3.2
Health Insurance Premiums of Insurance Companies in the United States by Type of Policy and by Type of Protection
(000,000 omitted)

Year	Total premiums	Group policies			Individual and family policies		
		Total	Loss of income	Hospital-medical	Total	Loss of income	Hospital-medical
1935	$ 175	$ 26	$ 26	*	$ 149	N.A.	N.A.
1940	286	65	48	$ 17	221	N.A.	N.A.
1945	550	215	125	90	335	N.A.	N.A.
1950	1,266	629	291	338	637	$ 361	$ 276
1955	2,743	1,573	553	1,020	1,170	554	616
1960	4,671	2,895	777	2,118	1,776	744	1,032
1965	7,352	4,683	1,050	3,633	2,669	847	1,822
1966	7,796	5,054	1,183	3,871	2,742	886	1,856
1967	8,295	5,464	1,270	4,194	2,831	948	1,883
1968	9,082	6,088	1,473	4,615	2,994	1,018	1,976
1969	10,197	6,938	1,724	5,214	3,259	1,131	2,128
1970	11,546	8,149	1,968	6,181	3,397	1,104	2,293
1971	12,777	9,170	2,189	6,981	3,607	1,154	2,453
1972	14,771	10,946	2,332	8,614	3,825	1,097	2,728
1973	16,104	11,807	2,414	9,393	4,297	1,304	2,993
1974	17,915	13,193	2,603	10,590	4,722	1,445	3,277
1975	20,795	15,918	2,828	13,090	4,877	1,807	3,070
1976	24,502	19,366	3,144	16,222	5,136	1,854	3,282
1977	28,676	23,234	3,543	19,691	5,442	1,859	3,583
1978	32,713	26,939	4,539	22,400	5,774	1,990	3,784
1979	37,941	31,724	4,933	26,791	6,217	2,096	4,121
1980	43,666	36,801	5,277	31,524	6,865	1,956	4,909
1981	48,998	42,465	5,240	37,225	6,533	1,834	4,699
1982	58,341	50,031	5,499	44,532	8,310	2,530	5,777
1983	63,190	54,939	5,099	49,840	8,251	1,993	6,258
1984	70,440	60,841	5,006	55,835	9,599	2,374	7,225
1985	75,169	64,366	4,836	59,530	10,803	2,917	7,886
1986	75,486†	65,903	4,966	60,937	9,583	2,885	6,698

N.A.—Not available.

*Less than $500,000.

†Beginning in 1986, insurance company premiums include reinsurance ceded to other insurance companies and exclude reinsurance assumed from other insurance companies.

NOTE: For 1975 and later, data include premiums paid in Puerto Rico and U.S. territories and possessions. Insurance company premiums before 1975 include only a portion of administrative service only (ASO) agreements and minimum premium plans (MPP). Data prior to 1972 refer to written premiums (which, for group policies, include minor adjustments to reflect premiums of the particular year) and include accidental death and dismemberment premiums in the "Loss of income" categories. Data for 1972 and later refer to earned premiums and are revised to exclude premiums for accidental death and dismemberment and other such limited coverages.

SOURCE: Health Insurance Association of America.

Table 4.2
Medicaid Recipients and Benefits Paid By Federal and State Governments* (000,000 omitted)

Fiscal year	Total		Age 65 and over		Dependent children†		All others	
	Annual recip-ients	Annual benefits paid	Annual recip-ients	Annual benefits paid	Annual recip-ients	Annual benefits paid	Annual recip-ients	Annual benefits paid
1972	17.6	$ 6,300	3.3	$ 1,925	11.0	$ 2,101	3.3	$ 2,274
1973	19.6	8,639	3.5	3,235	12.7	2,872	3.4	2,532
1974	21.5	9,983	3.7	3,691	13.9	3,398	3.9	2,893
1975	22.0	12,242	3.6	4,358	14.1	4,248	4.3	3,637
1976	22.8	14,091	3.6	4,910	14.7	4,719	4.5	4,462
1977	22.8	16,239	3.6	5,499	14.4	5,216	4.8	5,524
1978	22.0	17,992	3.4	6,308	14.0	5,421	4.6	6,264
1979	21.5	20,472	3.4	7,046	13.7	5,905	4.5	7,520
1980	21.6	23,311	3.4	8,739	14.2	6,354	4.4	8,217
1981	22.0	27,204	3.4	9,926	14.8	7,271	4.4	10,007
1982	21.6	29,399	3.2	10,739	14.9	7,566	4.3	11,094
1983	21.6	32,391	3.4	11,954	15.1	8,323	4.1	12,114
1984	21.6	33,895	3.2	12,819	15.3	8,400	4.1	12,675
1985	21.8	37,507	3.1	14,096	15.3	9,160	3.4	14,251
1986	22.5	41,027	3.1	15,100	15.7	10,013	3.7	15,915

*Excludes territories and possessions.

†Includes adults in families with dependent children.

NOTE: Detail may not add to totals due to rounding. Excludes premium and per capita amounts and state expenditures not eligible for federal matching funds.

SOURCE: U.S. Department of Health and Human Services, Health Care Financing Administration, Office of the Actuary, Medicaid Statistics Branch.

Table 4.3
Medicare Enrollments and Benefit Payments (000,000 omitted)

Calendar year	Hospital and/or medical insurance		Hospital insurance (Part A)		Supplementary medical insurance (Part B)	
	Number of enrolled persons*	Benefit payments	Number of enrolled persons*	Benefit payments	Number of enrolled persons*	Benefit payments
All Enrollees						
1966 (July-Dec.)	19.1	$ 1,019	19.1	$ 891	17.7	$ 128
1967	19.5	4,549	19.5	3,353	17.9	1,197
1968	19.8	5,697	19.8	4,179	18.8	1,518
1969	20.1	6,603	20.0	4,739	19.2	1,865
1970	20.5	7,099	20.4	5,124	19.6	1,975
1971	20.9	7,868	20.7	5,751	20.0	2,117
1972	21.3	8,643	21.1	6,318	20.4	2,325
1973	23.5	9,583	23.3	7,057	22.5	2,526
1974	24.2	12,418	23.9	9,099	23.2	3,318
1975	25.0	15,588	24.6	11,315	23.9	4,273
1976	25.7	18,420	25.3	13,340	24.6	5,080
1977	26.5	21,773	26.1	15,735	25.4	6,038
1978	27.2	24,919	26.8	17,667	26.1	7,252
1979	27.9	29,313	27.5	20,605	26.8	8,708
1980	28.5	35,686	28.1	25,051	27.4	10,635
1981	29.0	43,442	28.6	30,329	27.9	13,113
1982	29.5	51,086	29.1	35,631	28.4	15,455
1983	30.0	57,443	29.6	39,337	29.0	18,106
1984	30.5	62,870	30.0	43,209	29.4	19,661
1985	31.1	70,391	30.6	47,444	30.0	22,947
1986	31.7	74,187	31.2	49,018	30.6	25,169
Enrollees Age 65 and Over						
1966 (July-Dec.)	19.1	$ 1,019	19.1	$ 891	17.7	$ 128
1967	19.5	4,549	19.5	3,353	17.9	1,197
1968	19.8	5,697	19.8	4,179	18.8	1,518
1969	20.1	6,603	20.0	4,739	19.2	1,865
1970	20.5	7,099	20.4	5,124	19.6	1,975
1971	20.9	7,868	20.7	5,751	20.0	2,117
1972	21.3	8,643	21.1	6,318	20.4	2,325
1973	21.8	9,192	21.6	6,803	20.9	2,389
1974	22.3	11,223	22.0	8,295	21.4	2,928
1975	22.8	13,994	22.5	10,250	21.9	3,744
1976	23.3	16,339	22.9	11,959	22.4	4,380
1977	23.8	19,178	23.5	14,012	23.0	5,166
1978	24.4	21,796	24.0	15,644	23.5	6,152
1979	24.9	25,472	24.5	18,144	24.1	7,328
1980	25.5	31,031	25.1	22,096	24.7	8,935
1981	26.0	37,793	25.6	26,785	25.2	11,008
1982	26.5	44,393	26.1	31,413	25.7	12,980
1983	27.1	50,152	26.7	34,761	26.3	15,391
1984	27.6	55,374	27.1	38,321	26.8	17,053
1985	28.2	62,185	27.7	42,074	27.3	20,111
1986	28.8	57,127	28.3	40,456	27 9	16,671

*As of July 1.

NOTE: Some data have been revised. Detail may not add to totals due to rounding.

SOURCE: Department of Health and Human Services, Bureau of Data Management and Strategy, Health Care Financing Administration.

Table 5.1
National Health Expenditures, by Type of Expenditure and Source of Funds, 1987* (000,000,000 omitted)

Type of Expenditure	Total	Private	Public
Personal health care	$438.9	$269.3	$169.6
Program administration and net cost of insurance	25.9	19.4	6.6
Government public health activities	14.4	—	14.4
Research	9.0	0.4	8.6
Construction	8.3	5.7	2.5
Total	$496.6	$294.8	$201.7

*Projected

NOTE: Detail may not add to totals due to rounding.

SOURCE: U.S. Department of Health and Human Services, Health Care Financing Administration, *Health Care Financing Review*, Summer 1987.

Table 5.2
Comparison of Growth Rates of Gross National Product and National Health Expenditures

Calendar year	Gross National Product		National Health Expenditures		NHE as percent of GNP
	Amount (000,000,000)	Annual rate of growth	Amount (000,000,000)	Annual rate of growth	
1950	$ 288.3	10.7%	$ 12.7	12.2%	4.4%
1955	405.9	9.0	17.7	7.0	4.4
1960	515.3	3.9	26.9	8.7	5.2
1965	705.1	8.5	41.9	9.2	5.9
1970	1,015.5	5.3	75.0	14.3	7.4
1971	1,102.7	8.6	83.5	11.3	7.6
1972	1,212.8	10.0	94.0	12.6	7.8
1973	1,359.3	12.1	103.4	10.0	7.6
1974	1,472.8	8.3	116.1	12.3	7.9
1975	1,598.4	8.5	132.7	14.3	8.3
1976	1,782.8	11.5	150.8	13.6	8.5
1977	1,990.5	11.7	169.9	12.7	8.5
1978	2,249.7	13.0	189.7	11.7	8.4
1979	2,508.2	11.5	214.7	13.2	8.6
1980	2,732.0	8.9	248.1	15.6	9.1
1981	3,052.6	11.7	287.0	15.7	9.4
1982	3,166.0	3.7	323.6	12.8	10.2
1983	3,405.7	7.6	357.2	10.4	10.5
1984	3,772.2	10.7	390.2	9.2	10.3
1985	4,010.3	6.3	425.0	8.9	10.6
1986	4,235.0	5.6	458.2	7.8	10.8

SOURCES: U.S. Department of Health and Human Services, Health Care Financing Administration, *Health Care Financing Review*, Summer 1987.

Table 5.3
National Health Expenditure by Type of Expenditure
(000,000,000 omitted)

Type of expenditure	1970	1975	1980	1985	1986*	1987**
Total	$75.0	$132.7	$248.1	$422.6	$458.2	$496.6
Health services and supplies	69.6	124.3	236.2	407.2	442.0	479.3
Personal health care expenses	65.4	117.1	219.7	371.3	404.0	438.9
Hospital care	28.0	52.4	101.6	167.2	179.6	192.6
Physicians' services	14.3	24.9	46.8	82.8	92.0	101.4
Dentists' services	4.7	8.2	15.4	27.1	29.6	32.4
Other professional services	1.6	2.6	5.7	12.4	14.1	16.2
Drugs and medical sundries	8.0	11.9	18.8	28.7	30.6	32.8
Eyeglasses and appliances	1.9	3.2	5.1	7.5	8.2	8.8
Nursing home care	4.7	10.1	20.4	35.0	38.1	41.6
Other health services	2.1	3.8	5.9	10.8	11.9	13.1
Program administration and net cost of insurance	2.8	4.0	9.2	23.6	24.5	25.9
Government public health activities	1.4	3.2	7.3	12.3	13.4	14.4
Research and medical facilities construction	5.4	8.4	11.9	15.4	16.3	17.3
Research	2.0	3.3	5.4	7.4	8.2	9.0
Construction	3.4	5.1	6.5	8.1	8.0	8.3

*Provisional

**Projected

NOTE: Detail may not add to totals due to rounding.

SOURCE: U.S. Department of Health and Human Services, Health Care Financing Administration, *Health Care Financing Review*, Summer 1987.

Table 5.6
Factors Affecting Growth of Personal Health Care Expenditures: Twelve Month Period Ending December

	1981	1982	1983	1984	1985	1986
All factors	100%	100%	100%	100%	100%	100%
Prices	72	78	70	75	63	54
Population	6	8	11	11	11	11
Intensity	22	14	19	14	26	35

SOURCE: U.S. Department of Health and Human Services, Health Care Financing Administration, *Health Care Financing Review*, Summer 1987.

Table 5.7
Personal Health Care Expenditures by Type of Payer and Type of Expenditure, 1987* (000,000,000 omitted)

Source of payment	Total personal care	Hospital care	Physicians' services	Nursing home care	Other health services
Personal health care expenditures	$438.9	$192.6	$101.4	$41.6	$103.3
Direct payments	127.9	20.5	28.2	21.1	58.1
Third party payments	311.0	172.1	73.3	20.5	45.2
Private health insurance	136.0	71.9	42.5	0.4	21.2
Other private funds	5.5	2.3	0.1	0.3	2.8
Government	169.6	97.9	30.7	19.8	21.2
Medicare	78.9	50.9	22.0	0.6	5.4
Medicaid	47.5	16.9	4.3	17.3	9.0
Other	43.2	30.1	4.4	1.9	6.8

*Projected

NOTE: Detail may not add to totals due to rounding.

SOURCE: U.S. Department of Health and Human Services, Health Care Financing Administration, *Health Care Financing Review*, Summer 1987.

Table 5.8
Personal Health Care Expenditures by Source of Payment

Year	Total	Direct patient payments	Third parties: All third parties	Private health insurance	Other private funds	Government: Total	State and local	Federal: Total*	Medicare	Medicaid
Amount in billions										
1965	$ 35.9	$ 18.5	$ 17.3	$ 8.7	$0.8	$ 7.9	$ 4.3	$ 3.6	—	—
1966	39.7	19.6	20.0	9.1	0.8	10.1	4.9	5.3	$ 1.0	$ 1.5
1967	44.5	19.0	25.5	9.6	0.8	15.1	5.6	9.5	4.5	2.9
1968	50.3	20.7	29.6	10.9	0.9	17.8	6.4	11.4	5.7	3.8
1969	57.1	23.0	34.0	12.9	0.9	20.2	7.0	13.2	6.6	4.4
1970	65.4	26.5	38.9	15.3	1.1	22.4	7.9	14.5	7.1	5.2
1971	72.2	28.1	44.1	17.2	1.3	25.6	8.8	16.8	7.9	6.8
1972	80.5	30.6	49.9	19.0	2.0	28.8	9.9	18.9	8.6	8.2
1973	89.0	33.3	55.7	21.4	2.2	32.1	11.1	21.1	9.6	9.3
1974	101.3	36.2	65.1	25.1	1.5	38.5	12.8	25.7	12.4	10.8
1975	117.1	38.1	79.0	31.2	1.6	46.3	14.9	31.4	15.6	13.5
1976	132.8	42.0	90.8	37.6	1.8	51.4	15.3	36.1	18.4	15.1
1977	149.1	46.4	102.7	43.0	2.0	57.8	16.8	40.9	21.8	16.9
1978	167.4	50.7	116.7	49.1	2.1	65.5	19.2	46.3	24.9	18.8
1979	189.7	55.8	133.8	56.9	2.3	74.6	21.3	53.3	29.3	21.8
1980	219.7	63.0	156.7	67.5	2.7	86.5	24.0	62.5	35.7	25.2
1981	254.7	72.6	182.1	78.4	3.2	100.5	26.3	74.1	43.5	29.0
1982	286.5	79.6	206.9	89.9	3.5	113.5	29.5	83.9	51.1	31.3
1983	314.7	88.7	226.0	98.0	4.0	124.1	31.1	92.9	57.4	33.9
1984	341.1	97.8	243.3	104.9	4.3	134.1	33.2	100.9	62.9	36.3
1985	371.3	105.3	266.0	113.0	4.6	148.3	35.7	112.7	70.5	40.1
1986**	404.0	116.1	287.9	122.9	5.0	160.0	38.1	121.8	76.0	43.6
1987†	438.9	127.9	311.0	136.0	5.5	169.6	40.8	128.8	78.9	47.5
Per capita amount										
1965	$ 176	$ 91	$ 85	$ 42	$ 4	$ 39	$ 21	$ 18	N.A.	N.A.
1966	192	95	97	44	4	49	24	25	N.A.	N.A.
1967	213	91	122	46	4	72	27	45	N.A.	N.A.
1968	239	98	140	52	4	84	30	54	N.A.	N.A.
1969	268	108	160	61	4	95	33	62	N.A.	N.A.
1970	304	123	181	71	5	104	37	68	N.A.	N.A.
1971	332	129	203	79	6	118	41	77	N.A.	N.A.
1972	367	140	227	87	9	131	45	86	N.A.	N.A.
1973	402	150	252	97	10	145	50	95	N.A.	N.A.
1974	454	162	292	113	7	173	57	115	N.A.	N.A.
1975	521	169	351	139	7	206	66	140	N.A.	N.A.
1976	586	185	400	166	8	227	67	159	N.A.	N.A.
1977	652	203	449	188	9	253	74	179	N.A.	N.A.
1978	725	220	506	213	9	284	83	201	N.A.	N.A.
1979	814	240	574	244	10	320	91	229	N.A.	N.A.
1980	934	268	666	287	11	367	102	266	N.A.	N.A.
1981	1,071	305	766	330	13	423	111	312	N.A.	N.A.
1982	1,193	332	861	374	15	472	123	349	N.A.	N.A.
1983	1,298	366	932	404	16	512	128	383	N.A.	N.A.
1984	1,394	400	994	429	18	548	136	412	N.A.	N.A.
1985	1,502	426	1,076	457	19	600	144	456	N.A.	N.A.
1986**	1,620	466	1,154	493	20	641	153	488	N.A.	N.A.
1987†	1,744	508	1,236	540	22	674	512	162	N.A.	N.A.

N.A. — Not available.

*Includes funds not identified separately.

**Estimated.

†Projected.

NOTE: Some data are revised from previous editions.

SOURCE: U.S. Department of Health and Human Services, Health Care Financing Administration, *Health Care Financing Review*, Summer 1987.

Table 5.9
Personal Consumption Expenditures by Type of Product, United States, 1986

Type of Product	Personal consumption expenditures (000,000,000 omitted)	Percent of total
Food (including alcohol)	$ 497.8	17.8%
Housing	436.9	15.6
Transportation	365.3	13.0
Medical care*	355.3	12.7
Household operation	343.0	12.3
Clothing, accessories and jewelry	209.1	7.5
Recreation	198.0	7.1
Personal business	191.2	6.8
Religious and welfare activities	62.4	2.2
Private education and research	46.9	1.7
Personal care	41.4	1.5
Tobacco	34.2	1.2
Foreign travel and remittances—net	11.9	0.4
Funeral and burial expenses	6.4	0.2
Total	$2,799.8	100.0%

*Includes all expenses for health insurance (except loss of income type).

SOURCES: U.S. Department of Commerce, Bureau of Economic Analysis, *Survey of Current Business*, July 1987, and Health Insurance Association of America.

Table 5.10
Ratio of Personal Consumption Expenditures for Medical Care to Disposable Personal Income and to Total Personal Consumption Expenditures in the United States

(000,000,000 omitted)

(1) Calendar year	(2) Personal consumption expenditures for medical care*	(3) Disposable personal income	(4) Total personal consumption expenditures	(5) Ratio of col. (2) to col. (3)	(6) Ratio of col. (2) to col. (4)
1950	$ 8.8	$ 207.5	$ 192.1	4.3%	4.6%
1955	13.4	278.8	257.9	4.8	5.2
1960	20.6	358.9	330.7	5.7	6.2
1965	31.6	486.8	440.7	6.5	7.2
1966	34.3	525.9	477.3	6.5	7.2
1967	37.1	562.1	503.6	6.6	7.4
1968	42.5	609.6	552.5	7.0	7.7
1969	48.3	656.7	597.9	7.4	8.1
1970	55.0	715.6	640.0	7.7	8.6
1971	60.9	776.8	691.6	7.8	8.8
1972	67.6	839.6	757.6	8.1	9.0
1973	75.1	949.8	837.2	7.9	9.0
1974	84.3	1,038.3	916.5	8.1	9.2
1975	96.9	1,142.8	1,012.8	8.5	9.6
1976	109.9	1,252.6	1,129.3	8.8	9.7
1977	126.5	1,379.3	1,257.2	9.2	10.1
1978	141.0	1,151.2	1,403.5	12.2	10.0
1979	160.6	1,729.3	1,566.8	9.3	10.3
1980	185.7	1,917.9	1,732.6	9.7	10.7
1981	217.3	2,127.6	1,915.1	10.2	11.3
1982	242.7	2,261.4	2,050.7	10.7	11.8
1983	266.5	2,428.1	2,234.5	11.0	11.9
1984	296.1	2,668.6	2,430.5	11.1	12.2
1985	324.4	2,841.1	2,629.4	11.4	12.3
1986	355.3	3,022.1	2,799.8	11.8	12.7

*Includes all expenses for health insurance (except loss of income type).

SOURCES: U.S. Department of Commerce, Bureau of Ecomomic Analysis, *Survey of Current Business* (various issues) and Health Insurance Association of America.

Table 5.11
Personal Consumption Expenditures for Medical Care in the United States (000,000,000 omitted)

Calendar year	Total medical care	Hospital services	Physicians' services	Medicines and appliances	Dentists' services	Net cost of health insurance	All other medical care
1950	$ 8.8	$ 2.1	$ 2.6	$ 2.2	$ 1.0	$0.3	$ 0.8
1955	13.4	3.4	3.8	3.0	1.5	0.6	1.1
1960	20.6	5.6	5.8	4.7	2.0	0.8	1.8
1965	31.6	8.9	8.5	6.4	2.8	1.3	3.7
1966	34.3	10.1	9.1	6.7	3.0	1.4	4.0
1967	37.1	11.8	10.0	7.0	3.4	1.3	3.7
1968	42.5	14.1	10.9	7.8	3.7	2.0	4.1
1969	48.3	17.0	12.4	8.6	4.3	1.9	4.1
1970	55.0	19.7	14.0	10.0	4.9	2.1	4.3
1971	60.9	23.2	15.3	10.5	5.1	2.6	4.2
1972	67.6	25.9	16.6	11.5	5.6	3.5	4.5
1973	75.1	28.8	18.4	12.5	6.6	3.6	5.2
1974	84.3	33.7	20.3	13.6	7.3	3.6	5.8
1975	96.9	40.1	23.5	14.9	8.2	3.2	7.0
1976	109.9	46.6	25.8	16.3	9.3	3.6	8.4
1977	126.5	53.3	29.6	17.4	10.3	5.4	10.4
1978	141.0	61.0	32.3	19.2	11.3	4.7	12.4
1979	160.6	70.0	36.3	21.6	12.3	5.6	14.8
1980	185.7	82.0	42.0	23.5	13.7	6.9	17.6
1981	217.3	96.8	49.0	25.8	16.1	7.6	22.0
1982	242.7	110.3	54.4	27.6	17.4	8.8	24.1
1983	266.5	119.6	61.1	30.3	18.5	11.0	25.8
1984	296.1	130.6	67.1	33.0	19.8	15.2	30.4
1985	324.4	140.0	73.3	35.3	21.3	17.7	36.8
1986	355.3	152.1	80.2	38.0	22.5	20.1	42.3

NOTE: Some data are revised. The data exclude private expenditures in federal, state, city and other government hospitals and nursing homes. In some cases the sum of the items does not equal the "Total medical care" shown because of rounding.

SOURCE: U.S. Department of Commerce, Bureau of Economic Analysis, *Survey of Current Business*, various issues.

Table 5.12
Consumer Price Index for Medical Care Items in the United States (Annual Average, 1967 = 100.0)

Calendar year	All medical care items	Physicians' fees	Dentists' fees	Hospital room	Drugs and prescriptions	
					Prescription drugs	Over-the-counter drugs
Urban wage and clerical workers						
1947	48.1	51.4	56.9	23.1	N.A.	N.A.
1950	53.7	55.2	63.9	30.3	92.6	N.A.
1955	64.8	65.4	73.0	42.3	101.6	N.A.
1960	79.1	77.0	82.1	57.3	115.3	N.A.
1965	89.5	88.3	92.2	75.9	102.0	N.A.
1966	93.4	93.4	95.2	83.5	101.8	N.A.
All urban consumers						
1967	100.0	100.5	100.4	101.2	99.9	100.2
1968	106.0	106.1	105.9	114.8	98.2	102.7
1969	113.4	112.9	112.9	128.8	99.5	103.4
1970	120.6	121.4	119.3	145.4	101.2	106.2
1971	128.4	129.8	127.0	163.1	101.3	110.2
1972	132.5	133.8	132.3	173.9	100.9	111.3
1973	137.7	138.2	136.4	182.1	100.5	112.4
1974	150.5	150.9	146.8	201.5	102.9	117.5
1975	168.6	169.4	161.9	236.1	109.3	130.1
1976	184.7	188.5	172.2	268.6	115.2	138.9
1977	202.4	206.0	185.1	299.5	122.1	148.5
1978	219.4	223.1	198.1	332.4	131.6	159.0
1979	239.7	243.6	214.8	370.3	141.8	170.7
1980	265.9	269.3	240.2	418.9	154.8	188.1
1981	294.5	299.0	263.3	481.1	172.5	211.4
1982	328.7	327.1	283.6	556.7	192.7	234.2
1983	357.3	352.3	302.7	619.7	213.8	251.7
1984	379.5	376.8	327.3	670.9	234.3	267.3
1985	403.1	398.8	347.9	710.5	256.5	281.7
1986	433.5	427.7	367.3	753.1	278.6	295.5
1987	462.2	459.1	392.1	807.5	300.8	311.1

N.A.—Not Available.

NOTE: Some data are revised.

SOURCE: U.S. Department of Labor, Bureau of Labor Statistics, *CPI Detailed Report*, various issues.

Table 5.15
Average Cost to Community Hospitals Per Patient Day and Per Patient Admission; Average Length of Stay in Community Hospitals in the United States

Calendar year	Average cost to hospital per adjusted inpatient day*			Average length of hospital stay (days)	Average cost to hospital per adjusted admission*
	Total	Payroll	Other		
1946	$ 9.39	$ 4.98	$ 4.41	9.1	$ 85.45
1950	15.62	8.86	6.76	8.1	126.52
1955	23.12	14.26	8.86	7.8	180.34
1960	32.23	20.08	12.15	7.6	244.95
1961	34.98	21.54	13.44	7.6	265.85
1962	36.83	22.79	14.04	7.6	279.91
1963	38.91	24.01	14.90	7.7	299.61
1964	41.58	25.26	16.32	7.7	320.17
1965	44.48	27.44	17.04	7.8	346.94
1966	48.15	29.41	18.74	7.9	380.39
1967	54.08	32.44	21.64	8.3	448.86
1968	61.38	36.61	24.77	8.4	515.59
1969	70.03	41.36	28.67	8.3	581.25
1970	81.01	47.30	33.71	8.2	664.28
1971	92.31	53.80	38.51	8.0	738.48
1972	105.30	59.80	45.50	7.9	831.70
1973	102.40	57.00	45.40	7.8	798.70
1974	113.60	61.90	51.70	7.8	886.10
1975	133.80	70.90	62.90	7.7	1,030.30
1976	151.80	78.00	73.80	7.7	1,168.90
1977	174.00	87.40	86.60	7.6	1,322.40
1978	194.34	96.59	97.75	7.6	1,474.21
1979	217.34	107.37	109.97	7.6	1,641.48
1980	245.12	119.13	125.99	7.6	1,850.96
1981	284.33	138.18	146.15	7.6	2,171.20
1982	327.37	158.12	169.25	7.6	2,500.52
1983	369.49	176.25	193.24	7.6	2,789.18
1984	411.10	194.04	217.06	7.3	2,995.38
1985	460.19	213.07	247.12	7.1	3,244.74
1986	500.81	226.87	273.94	7.1	3,532.51

*Adjusted expenses per admission is the average expense to the hospital in providing care for *one inpatient stay*. These expenses are derived by subtracting outpatient expenses from total expenses, and dividing the resulting amount by total admissions. Adjusted *expenses per inpatient day* covers expense of inpatient care only and is derived by dividing expenses by inpatient days.

NOTE: Data prior to 1972 include hospital units of institutions. Total expenses include: payroll expenses; employee benefits; professional fees; depreciation expense; supplies and purchased services. Payroll expenses include: physicians' and dentists' salaries; other personnel. Prior to 1972 payroll expenses also included: medical and dental interns and residents, trainees in medical technology and administration. Data for 1973-1986 have been adjusted to include data for outpatients on an inpatient equivalency basis.

SOURCES: American Hospital Association, *Hospital Statistics* (various annual editions) and Health Insurance Association of America.

Table 5.16
Community Hospital Statistics, 1986

State	Average cost to hospital per day	Average length of hospital stay	Average cost to hospital per stay
Alabama	$417.43	7.0	$2,911.00
Alaska	799.81	5.8	4,573.28
Arizona	638.99	6.0	3,810.02
Arkansas	405.80	6.4	2,572.02
California	705.18	6.3	4,403.97
Colorado	535.92	6.8	3,622.64
Connecticut	560.79	7.1	3,932.16
Delaware	526.27	6.9	3,595.76
District of Columbia	664.03	7.9	5,267.76
Florida	535.90	7.0	3,715.39
Georgia	425.77	6.7	2,820.02
Hawaii	489.93	7.5	3,707.00
Idaho	402.19	6.5	2,631.11
Illinois	535.03	7.3	3,893.78
Indiana	491.74	6.6	3,203.69
Iowa	369.20	8.0	2,940.48
Kansas	407.00	7.6	3,062.78
Kentucky	405.60	6.4	2,574.72
Louisiana	520.06	6.2	3,212.34
Maine	410.20	7.7	3,120.82
Maryland	478.15	7.1	3,406.69
Massachusetts	559.96	7.7	4,259.65
Michigan	564.42	7.2	4,001.85
Minnesota	400.29	9.0	3,599.84
Mississippi	336.07	6.6	2,222.87
Missouri	504.53	7.4	3,721.81
Montana	324.35	9.0	2,969.81
Nebraska	372.45	8.9	3,303.44
Nevada	765.79	5.7	4,388.89
New Hampshire	454.38	6.4	2,877.56
New Jersey	431.32	7.4	3,187.68
New Mexico	537.43	5.6	2,995.97
New York	463.83	9.1	4,212.70
North Carolina	408.70	6.9	2,807.27
North Dakota	344.57	9.8	3,319.66
Ohio	532.69	6.9	3,640.25
Oklahoma	489.64	6.4	3,116.41
Oregon	607.49	5.3	3,203.21
Pennsylvania	493.17	7.5	3,662.01
Rhode Island	485.40	7.6	3,685.93
South Carolina	397.19	7.0	2,773.97
South Dakota	305.67	8.9	2,681.63
Tennessee	425.25	6.9	2,914.89
Texas	517.14	6.1	3,159.53
Utah	605.10	5.2	3,086.19
Vermont	353.10	8.5	3,017.43
Virginia	434.75	7.1	3,057.21
Washington	614.50	5.5	3,351.95
West Virginia	427.46	6.6	2,790.35
Wisconsin	415.29	7.7	3,183.29
Wyoming	385 62	6.9	2,632.34
Total U.S.	500.81	7.1	3,532.51

SOURCE: *Hospital Statistics*, Copyright © 1987 by the American Hospital Association. Reproduced by permission.

Table 5.17
Comparison of Hospital Semiprivate Room Charges by State

State	July 1986	July 1987	Percent change
Alabama	$186.66	$195.39	4.7%
Alaska	336.29	360.52	7.2
Arizona	215.18	231.91	7.8
Arkansas	149.71	151.55	1.2
California	311.54	334.93	7.5
Colorado	232.14	248.90	7.2
Connecticut	235.31	254.55	8.2
Delaware	274.07	291.61	6.4
District of Columbia	355.83	358.78	0.8
Florida	201.72	214.21	6.2
Georgia	157.11	166.59	6.0
Hawaii	266.24	279.90	5.1
Idaho	217.99	228.38	4.8
Illinois	268.82	282.17	5.0
Indiana	199.38	211.56	6.1
Iowa	186.11	198.95	6.9
Kansas	208.00	221.26	6.4
Kentucky	194.62	201.98	3.8
Louisiana	185.46	194.72	5.0
Maine	212.87	238.53	12.1
Maryland	213.43	222.66	4.3
Massachusetts	255.56	267.71	4.8
Michigan	282.59	298.43	5.6
Minnesota	219.85	229.71	4.5
Mississippi	121.99	130.01	6.6
Missouri	206.79	215.88	4.4
Montana	211.60	209.94	−0.8
Nebraska	168.16	177.63	5.6
Nevada	228.43	225.95	−1.1
New Hampshire	216.44	229.57	6.1
New Jersey	208.38	219.70	5.4
New Mexico	224.43	234.99	4.7
New York	256.66	272.48	6.2
North Carolina	146.61	154.28	5.2
North Dakota	183.25	192.27	4.9
Ohio	243.57	250.84	3.0
Oklahoma	174.78	181.93	4.1
Oregon	263.47	280.56	6.5
Pennsylvania	289.43	303.02	4.7
Rhode Island	231.05	240.70	4.2
South Carolina	149.21	158.55	6.3
South Dakota	171.52	182.34	6.3
Tennessee	167.88	175.13	4.3
Texas	176.97	188.04	6.3
Utah	226.91	239.55	5.6
Vermont	248.86	264.98	6.5
Virginia	172.31	182.78	6.1
Washington	258.45	272.67	5.5
West Virginia	182.02	191.26	5.1
Wisconsin	175.08	179.34	2.4
Wyoming	254.00	240.00	−5.5
Total U.S.	235.80	249.48	5.8

SOURCE: Health Insurance Association of America, *Survey of Hospital Semi-Private Room Charges as of July 1987.*

Table 5.18
Fees for Surgical and OBG Procedures in the United States, 1987

Specialty	Median fee
General Surgeons	
Appendectomy	$ 714
Cholecystectomy	1,100
Inguinal hernia (unilateral)	704
Modified radical mastectomy	1,256
OBG Specialists	
Complete OB care (usual and routine)	$1,201
Total hysterectomy	1,421
D&C (diagnostic)	398
D&C (therapeutic)	401
Thoracic Surgeons	
Open heart surgery (with bypass)	$4,001
Lobectomy	2,001
Insertion of pacemaker	1,201
Thoracentesis	125
Dilation of esophagus	200
Neurosurgeons	
Wrist ganglionectomy	$ 601
Cranioplasty	2,001
Craniotomy	3,001
Lumbar laminectomy	2,227
Plastic Surgeons	
Complete rhinoplasty	$2,001
Facial rhytidectomy	3,001
Breast augmentation (bilateral)	2,001
Dermabrasion of facial scar	401
Excision of lipoma	301

SOURCE: *Medical Economics* magazine, October 5, 1987. Copyright © 1987 and published by Medical Economics Company, Inc. at Oradell, N.J. 07649. Reprinted by permission.

Table 5.20
Median Office Visit Fees by Physician Specialty and Type of Community, 1987

Specialty	First Office Visits			Office Revisits		
	Urban	Suburban	Rural	Urban	Suburban	Rural
FPs	$31	$30	$26	$25	$25	$21
GPs	35	31	25	26	25	21
All surgical specialists	50	50	35	29	30	22
All non-surgical specialists (Excluding FPs and GPs)	51	41	32	30	30	24

SOURCE: *Medical Economics* magazine, October 5, 1987. Copyright © 1987 and published by Medical Economics Company, Inc. at Oradell, N.J. 07649. Reprinted by permission.

Table 5.21
Regional Variations in Median Physician Fees, 1987

Specialty	First office visits				Office revisits			
	West	Midwest	South	East	West	Midwest	South	East
FPs	$ 36	$26	$29	*	$30	$22	$23	*
GPs	36	26	27	$30	30	21	22	$25
Internists	51	36	45	46	35	26	28	31
OBG specialists	61	41	51	61	36	26	30	40
Pediatricians	40	30	31	35	30	24	25	27
General surgeons	45	30	35	40	29	21	25	26
Neurosurgeons	126	76	91	*	36	26	35	*
Orthopedic surgeons	51	40	40	51	31	25	26	31
Plastic surgeons	44	35	36	55	26	*	25	*
Thoracic surgeons	*	50	51	*	*	25	26	*
All surgical specialists	54	40	41	51	31	25	28	31
All non-surgical specialists (Except FPs and GPs)	51	36	41	46	34	26	28	31

*Insufficient sample

SOURCE: *Medical Economics* magazine, October 5, 1987. Copyright © 1987 and published by Medical Economics Company, Inc. at Oradell, N.J. 07649. Reprinted by permission.

Additional Updated Tables

Updated information is available for the following tables from the 1986-87 *Source Book of Health Insurance Data.* Requests for these data may be made by ***written requests only*** addressed to Statistical Research, Public Relations Division, Health Insurance Association of America, 1001 Pennsylvania Avenue, N.W., Washington, D.C. 20004-2599, or by contracting directly the source of the information if other than the Association.

TABLE	TITLE
4.4	Medicare and Medicaid Benefits by State
4.5	Hospital and Medical Expenditures under Workers' Compensation
5.13	Annual Changes in Consumer Price Index
5.14	Consumer Price Index in the United States
5.23	Certain Costs of Accidents by Class
6.6	Number of Occupational Injuries and Illnesses and Lost Workdays, Private Sector, by Industry Division in the United States
6.8	Utilization of Community Hospitals in the United States
6.10	Rate of All Listed Surgical Operations of Patients Discharged from Short Stay, Non-Federal Hospitals by Age and Sex, United States
6.11	Rate of All Surgical Procedures for Inpatients Discharged from Short Stay Non-Federal Hospitals, by Sex, United States
6.12	Selected Community Hospital Facilities, Services and Special Beds in the United States
6.13	Number of Physician Visits per Person in the United States
7.1	Estimated Active Health Professionals in the United States

Tables Not Updated

No updated information is available for the following tables that appeared in the 1986-87 *Source Book of Health Insurance Data.*

TABLE	TITLE
4.6	Public Health Programs of State Health Agencies: Expenditures and Persons Served, 1984
5.5	Per Capita Amount of Personal Expenditures by Age and Type of Expenditure, 1984
5.19	Average Dentist Charges, Selected Areas National and Regional of the United States, 1985
5.22	Total Medical Costs of Having a Baby, 1986
6.1	Disability Due to Chronic and Acute Conditions, by Social and Economic Characteristics in the United States, 1985
6.2	Selected Health Characteristics by Geographic Region in the United States, 1985
6.3	Workdays Lost Due to Acute Conditions in the United States, 1985
6.4	Days Lost from School Per 100 Children (5-17) Per Year, Due to Acute Conditions, by Sex and Condition Group: United States, 1985
6.5	Percent Distribution of Persons with Limitation of Activity Due to Chronic Conditions by Degree of Limitations According to Sex and Age, 1985
6.7	Growth in the Social Security Disability Insurance Program
6.9	Rate of Discharges and Average Length of Stay for Patients Discharged from Short-Stay, Non-Federal Hospitals, by Sex: United States, 1985
7.2	Percentage of Practicing Physicians Affiliated with Health Maintenance Organizations, United States, 1986
7.3	Number of Preferred Provider Organizations, By Geographical Region of the United States, 1986
7.4	Number and Rate Per 100,000 Population of Active Physicians, Dentists, Pharmacists and Nurses, by State, 1984